HOLTON DIRECTCARE

Dr. Lassey's Guide to

Prediabetes

You don't have diabetes, but you don't *not* have diabetes. Right now you're in that nerve-wracking in-between place where your tests are starting to show serious red flags, signaling to us that it's time for some major life changes.

What is prediabetes?

We eat carbs (yum--think sugar/sweets, pasta, breads, potatoes, etc.) and our body makes insulin to tell our organs to use those carbs. However, with prediabetes the organs start ignoring insulin's message. So your body makes more insulin until those insulin-producing cells start to wear out. If you continue on your current path, your body will completely ignore insulin, and the insulin-producing cells will shut down. When that happens, you will officially have diabetes.

So what? I'm busy! I'll just take some pills when it becomes diabetes. Why should I really care about this now?

Here's a sobering statistic for you: up to 70% of prediabetics develop full-blown diabetes. If diabetes doesn't make you nervous, it should. Here are some things to look forward to in the next 20 or so years if we don't get things under control:

- **Heart attacks**: Both diabetes AND prediabetes increase your risk of heart disease, which in turn increases your chance of heart attack and stroke at a much younger age.
- **Blindness**: Can you guess the leading preventable cause of blindness in the country? Retinopathy caused by you guessed it! Diabetes.
- Numbness: Diabetes damages your nerves very frequently. For some people this gets so bad they can no longer write or walk normally. Even worse, you have to constantly worry about stepping on something (imagine having a rock in your boot all day that you don't know is there, and soon there's a deep hole in your foot that you don't notice...until five days later when your foot is infected--which you only discover because of the *smell*)
- **Amputations**: Remember that foot infection? Well, diabetes also messes up your healing, so wounds in diabetics can take months or even *years* to heal. Some people need to have toes or even entire feet amputated, because they just can't heal the wound on their own.
- **Needles**: Diabetics poke themselves anywhere from 2-8 times a day to measure their blood sugar and many give themselves shots of insulin and other medicines.

And that's not all. I could go on and on about how diabetes can give you recurrent skin infections, erectile dysfunction, irreversible kidney damage, etc. – but I'm sure you get the picture. **Diabetes is not something you want.**

That does sound pretty horrible. What can I do?

The biggest step is also the hardest. You need to improve your diet and start regularly exercising.

- 1) **Diet:** See my handout on Diet Guidelines. Don't be discouraged if you feel like you have a long way to go. Losing as little as 15-20 pounds can help.
- 2) **Exercise:** For those work-out novices, start with 15-20 minutes of brisk walking every day. You can then add on a few more minutes each week. Eventually we want to get you up to 30 minutes of exercise, 5 days per week.

I'll also want to periodically do some inexpensive blood tests to monitor your prediabetes and see if we need to start you on any medications.

The good news is that with proper lifestyle changes, **most people can reverse their prediabetes**. We're here to support you along the way!